REMARKS

Withdrawal of prior claim rejections in view of new grounds of rejection are noted.

Rejected claims 95 and 125 have been cancelled without prejudice.

Claims 84 and 103 have been rejected under 35 U.S.C. § 103(a) as being unpatentable over Goodwin et al '061 in view of Stephens et al '112. This rejection is respectfully traversed with respect to these claims as amended herein.

Independent claim 84 as now amended specifically recites, inter alia, "the tip being disposed on a distal end of the body to dissect tissue and facilitate passage of the tubular body through tissue under visualization through the tip by the endoscopic imaging element", and "a non-inflatable dilating element spaced proximally a selected length away from the cylindrical diameter of the distal tip and having an olive-shaped exterior contour that is disposed with rotational symmetry about the central axis and that gradually increases in cross-sectional dimension symmetrically about the central axis in the proximal direction from a distal edge of the dilating element that is spaced the selected length from the cylindrical diameter of the distal tip to a maximum cross-sectional dimension greater than the cross-sectional dimension of said distal edge, the dilating element then decreasing in cross-sectional dimension symmetrically about the central axis in the proximal direction to a cylindrical diameter smaller than said maximum

cross-sectional dimension at a proximal edge for facilitating atraumatic expansion of tissue following dissection by the tapered distal tip during advance of the tissue dissector through tissue, said selected length of spacing having an outer-dimension less than the maximum cross-sectional dimension of the dilating element and positioning the dilating element within an angle of the symmetrically conical tapered outer walls of the tip to inhibit the dilating element from impeding contact of the outer walls of the tip with a target vessel."

These aspects of the claimed invention establish a tissue-dissecting tip and a tissue-dilating element spaced proximally away from the tip along the central axis of the tubular body. In addition, the dilating element is defined as having a shape residing within the conical angle of the tapered walls of the tip, together with being spaced proximally a selected length away from the tip. And, the transparent tip facilitates visualization through the tip as it dissects tissue.

In addition, the dependent claim as amended now recites "the distal tip and the dilating element spaced the selected length from the distal tip are formed as a single unit removably mounted on the tubular body substantially symmetrically about the central axis."

These aspects of the claimed invention are not disclosed or fairly suggested by the cited references considered either alone or in the combination proposed by the Examiner. Specifically, Goodwin et al '061 is noted to rely upon only a distal

tip mounted at the distal end of tubular body 13 for dissecting tissue, with no companion tissue dilator positioned proximally of the distal tip.

And, as the Examiner notes, this reference is silent with respect to a dilating element (of any shape), and at best merely relies upon the blunt-edged blades 18 as tissue separators that are positioned on the conical walls of the distal tip.

Nor is the deficient disclosure of Goodwin et al '061 'cured' or enhanced by Stephens et al '112 that merely discloses a distal, tapered tip or shield 27 for sharp-edged blades 31-34, but with no additional dilator element of greater diameter or shape, as claimed, positioned proximally a selected length from the distal tip. And, the tip disclosed in this reference is not understood to be capable of providing any visualization therethrough to tissue being dissected. Thus, merely combining these references at best replaces the blunt-edged blades of Goodwin et al '061 with sharp-edged blades 31-34 of Stephens et al '112, with not an iota of disclosure or suggestion of an additional tissue dilator of greater cross-sectional dimension, shape and position, as claimed, spaced a selected length proximally from the distal tip. It is therefore respectfully submitted that these cited references, either alone or in combination, fail to establish even a *prima facie* basis, including *all* recited elements in the claimed structure from which a proper determination of obviousness can be formed. Amended claims 84 and 103 are therefore submitted to be patentably distinguishable over the cited art.

Claim 123 has been rejected under 35 U.S.C. § 103(a) as being unpatentable over Goodwin et al '061 in view of Stephens et al '112, further in view of Yoon '286. This rejection is respectfully traversed with respect to this claim as amended herein.

Dependent claim 123 is further limited over the specific recitations quoted in the above REMARKS by the additional recitation of "the dilating element is resiliently compressible in cross-sectional dimension."

These aspects of the claimed invention are not disclosed or even suggested by the cited references considered either alone or in the combination proposed by the Examiner. The deficiencies of Goodwin et al '061 and of Stephens et al '112 in failing to disclose a dilating element proximally spaced apart from a distal tip are discussed in the above Remarks. And, Yoon '286 merely discloses another form of safety shield over a trocar tip (i.e., collectively forming only a tapered tip having no capability of providing visualization therethrough), with no disclosure or suggestion of an additional tissue dilator of greater cross-sectional dimension, shape and position, as claimed, spaced a selected length proximally from such tapered tip. It is therefore respectfully submitted that amended dependent claim 123 is now patentably distinguishable over the cited art.

Favorable reconsideration and allowance of all pending claims are solicited.

Respectfully submitted,
Michael C. Stewart, et al.

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By: /Albert C. Smith/
Albert C. Smith, Reg. No.: 20,355
Fenwick & West LLP
Silicon Valley Center
801 California Street
Mountain View, CA 94041
Tel.: (650) 335-7296
Fax: (650) 938-5200